Caution: DRAFT FORM

This is an advance proof copy of an IRS tax form. It is subject to change and OMB approval before it is officially released. You can check the scheduled release date on our web site (www.irs.ustreas.gov).

If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

2350

Application for Extension of Time To File U.S. Income Tax Return

OIVIB	INO.	1545-0070

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Department of the Treasu

To File U.S. Income Tax Return

For U.S. Citizens and Resident Aliens Abroad Who Expect To Qualify for Special Tax Treatment

See instructions on back

nternal	Revenu	ue Service		See instructions on back.		
Please type of orint.		our first na	ame and initial	Last name	Your social security number	
		f a joint ret	urn, spouse's first name and initial	Last name	Spouse's social security numb	oer
ile by he du	e ^F	Home addr	ess (number and street)			
date fo iling		City or town	n, province or state, and country (includi	ng pectal or ZID code)		
our eturn.		Jily Of towi	n, province or state, and country (includi	ng postal of ZIP code)		
etuin.	·		Please fill in the	Return Label at the bottom of	this page.	
1	I reai	uest an e				 r 2000
•	or ot	her tax v	ear ending	because my tax home	y income tax return for the calendar year is in a foreign country and I expect to c	ualify
					ical presence test." (See instructions.)	, ,
2	Were	you pre	eviously granted an extension of	time to file for this tax year?		\square No
3	Will	you need	d additional time to allocate mor	ving expenses?		\square No
4a	Date	you firs	t arrived in the foreign country			
b	Date	qualifyir	ng period begins	; ends		
c	Your	foreign	home address			
					oid interest and late payment charges.	
5	Ente	r the am	ount of income tax paid with th	is form	· · · · · · • 5	
				g transfer (GST) tax return, compl		
				on these lines. (See instructions.)	and the second second	
				tax return (Form 709 or 709-A) \ Yo		
				the instructions and check here $\int S_{f i}$		
				are paying with this form		
b	Ente	r the am		er spouse is paying with this form	7b	
				Signature and Verification		
t is tru	penan ie, com	rect, and c	omplete; and, if prepared by someone o	ther than the taxpayer, that I am authorized to	tatements, and to the best of my knowledge and prepare this form.	ı bellet,
Sianat	tura a	f taynaya	r L		Date ►	
Jigi iai	iule 0	птахраус			Date •	
Signat	ture o	of spouse	e >		Date ▶	
•		f prepare				
other	than	taxpayer	<u> </u>		Date ►	
Please and re	e fill in eturn	n the Ret it to you.	urn Label below with your name, a lf you want it sent to another add	address, and social security number. These or to an agent acting for you, ente	ne IRS will complete the Notice to Applic the other address and add the agent's n	ant ame.
					(Do not de	etach)
			We have approved your applic	cation.	•	,
			We have not approved your a	pplication.		
	ce to					riod is
Appl	icant	t		of time for elections otherwise requir	·	
	Be plete		ove information, we cannot grant your day grace period.			
	ie IR		, , ,	ication because it was filed after the	3	
				Director	 Date	
	Тахр	aver's nan	ne (and agent's name, if applicable). If a		Taxpayer's social security numb	er
orint	. unp	_, 51 5 HdH	(=//a ago.it o riamo, ii applicabio). Il a	jama stam, also give spouse s nume.	. axpayor 5 550iai 566arity fluind	٥.
or k						
1 L	Numb	umber and street (include suite, room, or apt. no.) or P.O. box number			Spouse's social security numbe	
ase type or pr						
Return Label (Please type or print)	City	or town, pr	ovince or state, and country (including p	ostal or ZIP code)	Agents:	
ŒΙ					Always include taxpayer's name on Return I	_abel.